

COVER PAGE (NOV. 2007)

## State of South Carolina

Best Value Bid Amendment - I

Solicitation Number: Date Issued: Procurement Officer:

5400004436 8/14/2012 E. Madison Winslow E. Madion a Singles 803-898-3487

Phone:

E-Mail Address: winsloem@dhec.sc.gov

DESCRIPTION: Reagent kits and equipment to perform Hepatitis screening assays for Hepatitis A, B, and C by Enzyme Immunoassay.

USING GOVERNMENTAL UNIT: South Carolina Department of Health and Environmental Control

The Term "Offer" Means Your "Bid" or ' Number & Opening Date must appear or	'Proposal". Your of 1 package exterior.	fer must be See "Submii	submitted in a sealed package. Solicitation tting Your Offer" provision.							
SUBMIT YOUR SEALED OFFER TO	EITHER OF THE	FOLLOWI	ING ADDRESSES:							
MAILING ADDRESS: SC DHEC Attn: Procurement Services Divise 2600 Bull Street Columbia SC 29201-1708	ion	PHYSICAL ADDRESS: SC DHEC Attn: Procurement Services Division 2600 Bull Street Columbia SC 29201-1708								
SUBMIT OFFER BY (Opening Date/I		•	, , , , , , , , , , , , , , , , , , , ,							
CONFERENCE TYPE: Not Applicable DATE & TIME:			LOCATION: Not Applicable							
(As appropriate, see "Conferences - Pre-Bid/Proposal" &	"Site Visit" provisions)									
AWARD & Award will be posted on <b>September 11, 2012</b> . The award, this solicitation, any amendments, and any related notices will be posted at the following web address: <a href="http://www.procurement.sc.gov">http://www.procurement.sc.gov</a>										
the Solicitation. You agree to hold Your Offe	vith Your Offer. By sur r open for a minimum r Offer" and "Electronic Sign	of sixty (60)	· • • • •							
NAME OF OFFEROR  (full legal name of business submitting the offer)		Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.								
AUTHORIZED SIGNATURE		TAXPAYER IDENTIFICATION NO.								
(Person must be authorized to submit binding offer to conf	ract on behalf of Offeror.)	(See "Taxpayer Identification Number" provision)								
TITLE		STATE VENDOR NO.								
(business title of person signing above)		(Register to Obtain S.C. Vendor No. at www.procurement.sc.gov)								
PRINTED NAME	DATE SIGNED	STATE O	OF INCORPORATION							
(printed name of person signing above)		(If you are a co	orporation, identify the state of incorporation.)							
OFFEROR'S TYPE OF ENTITY: (Che	ck one)		(See "Signing Your Offer" provision.)							
Sole Proprietorship	Partnership		Other							
Corporate entity (not tax-exempt)	Corporation (tax-	exempt)	Government entity (federal, state, or local)							

### **PAGE TWO**

(Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business)					NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)						
				Area Code - Number - Extension Facsimile							
				E-mail Address							
PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)				ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)							
Payment Address same as Home Office Address Payment Address same as Notice Address (check only one)				Order Address same as Home Office Address Order Address same as Notice Address (check only one)							
ACKNOWLEDGMENT OF AMENDMENTS Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)											
Amendment No.	mendment No. Amendment Issue Date		Amendment No.	Amendment Issue Date		Amendment No.		Amendment Issue Date			Amendment Issue Date
	MPAddin										
DISCOUNT FOR 10 Calendar Days (%) 20 Calendar PROMPT PAYMENT (See "Discount for Prompt Payment" clause)				ar Days (%)  30 Calendar Days (%)  Calendar Days (%)							
PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at <a href="https://www.procurement.sc.gov/preferences">www.procurement.sc.gov/preferences</a> . ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT. VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES. [11-35-1524(E)(4)&(6)]											
PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C)(1)(i)&(ii)) or the Resident Contractor Preference (11-35-1524(C)(1)(iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).											
In-State Office Address same as Home Office Address In-State Office Address same as Notice Address (check only one)											

#### **AMENDMENTS TO SOLICITATION (JAN 2004)**

(a) The Solicitation may be amended at any time prior to opening. All actual and prospective Offerors should monitor the following web site for the issuance of Amendments: <a href="https://www.procurement.sc.gov">www.procurement.sc.gov</a> (b) Offerors shall acknowledge receipt of any amendment to this solicitation (1) by signing and returning the amendment, (2) by identifying the amendment number and date in the space provided for this purpose on Page Two, (3) by letter, or (4) by submitting a bid that indicates in some way that the bidder received the amendment. (c) If this solicitation is amended, then all terms and conditions which are not modified remain unchanged. [02-2A005-1]

# Amendment Number One Solicitation 5400004436

### **CHANGES**

The following changes have been made to the above-referenced solicitation:

- DHEC'S CONFIDENTIALITY POLICY (Part VII.C., page 30) is deleted from this solicitation.
- NEW OPENING DATE AND TIME: August 30, 2012/2:30 pm ET
- NEW AWARD POSTING DATE: From September 4, 2012 to September 11, 2012

### **Questions and Answers**

1. **Question:** DHEC's CONFIDENTIALITY POLICY - Page 30 of the solicitation requires Contractor to comply with this policy. Is this section applicable to this solicitation?

Answer: No. See "CHANGES" above.

2. Question: Section 3.6 Pricing (page 15) reads as written below:

"DHEC anticipates 2,000 tests annually; however, DHEC will not commit to a minimum number of tests per year.

Abbott products are used as a reference only

HAVAB-IgM (Hep A Antibody IgM)

ALJSAB (Hep B's Antibody)

Anti-HCV (Hep C Antibody)

Core- M (Hep B Core-lgM)

Core-Total (Hep B Core-Total)

**HBsAG** 

HBsAG confirmatory

HAVAB-G (Hepatits A Antibody IgG"

Can you confirm the anticipated volume for each individual assay or test listed above? Is it 2000 tests for each?

**Answer:** Anticipated volume for each individual assay or test is listed below (again, with Abbott products as a reference).

HAVAB-IgM (Hep A Antibody IgM): 12 tests

ALJSAB (Hep B's Antibody: 176 tests
Anti-HCV (Hep C Antibody): 2000 tests
Core- M (Hep B Core-lgM): 21 tests
Core- Total (Hep B Core-Total): 173 tests

HBsAG: 220 tests

HBsAG confirmatory: 9 tests

HAVAB-G (Hepatits A Antibody IgG: 12 tests